

Sales Order Form

Wasco Rep: _____ Rep #: _____ Date: _____
 Phone: _____ Fax: _____ Captains Club Member: Yes No
 Sold/Bill To: _____ Ship To: _____

Contact: _____ Email: _____
 Phone: _____ Fax: _____ Cell: _____
 Shipper Call Required 24 Hours Before Delivery: Yes No *(This will delay the delivery by at least one day)*
 New Customer Yes No New Account Set-Up Form Yes No
 Job Name: _____ Location: _____
 P.O. #: _____ Inquiry / Quote #: _____

Quantity	Type of Unit / Description	Unit Price	Total
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
Total Value of Order:			\$

Finish Requirement:
 Freight: Included: Yes No Tax Exempt: Yes No Exempt Certificate Enclosed: Yes No

Unit Price Breakdown:
 Is There Overage: Yes No

Commission Notes:
 Release To Fabrication: Yes No Hold Pending Approvals: Yes No Requested Ship Date: _____
 Submittals Needed By: _____ Number of Sets: Printed Drawings E-Mail Drawings

Email To: _____

Enclosed: _____

Special Notes: _____